250697

STA	ATE OF SO	UTH CAROLINA)			
(Caption of Case) Example: Application for a Class C Charter Certificate from John Doe dba Doe's Limo				BEFORE THE BLIC SERVICE COMMISSION OF SOUTH CAROLINA		
)) TRAN	TRANSPORTATION COVER SHEET		
Request for Contamin)						
~	2	-	•	DOCKET		
) NUMI	BER: 2011 - 64-T		
) If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.			
	se type or print) mitted by:	_				
Address:		13 Tranquisig	Fax:	(843)839-1258		
		mB, & 29577	Other: Email:			
as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely. NATURE OF ACTION (Check all that apply)						
	Application -	- Class C Taxi		Request to Amend Scope of Authority		
	Application -	- Class C Charter		Request to Amend Tariff (rate increase, etc.)		
	Application -	- Class C Charter Bus		Request to Amend Passenger Limit		
	Application -	- Class C Non-Emergency		Request		
	Application -	- Class E Household Goods		571-15-14		
	Application -	- Class E Hazardous Waste		Late-Filed Exhibit	an an	
	Application		- 🔲	Letter CLSA CO SO	•	
	Request for E	extension to Comply with Order		Late-Filed Exhibit Letter Proposed Order		
	Request for C Public Conve	Order Granting Authority to Obtain Certificate inience and Necessity to Be Rescinded	of	Publisher's Affidavit		
	Request for C	Cancellation of Certificate		Reservation Letter		
	Request for S	uspension		Response		
	Request for R	einstatement		Return to Petition		
<u> </u>	Request for N	ame Change on Certificate		Other:		

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

Request for Cancellation of Certificate

File the original with: Public Service Commission of South Carolina Clerk's Office Motor Carrier Matters P.O. Box 11649 Columbia, S.C. 29211 (803) 896 - 5100 FAX (803) 896-5199	Mail or fax a copy to: S.C. Office of Regulatory Staff Transportation Department 1401 Main Street, Suite 900 Columbia, S.C. 29201 (803) 737-0578 FAX (803) 737-0815			
DATE: 5/21/14				
Please consider this a request to cancel my:				
Class C Taxi Certificate	Class A Restricted Certificate			
Class C Charter Certificate				
Class C Charter Bus Certificate				
Non-Emergency Certificate				
Class E Household Goods Certificate				
Class E Hazardous Wastes Certificate				
My Certificate Number is 8433				
(Name of Company)	(If applicable)			
(Street Address)	(Mailing Address if different from Street Address)			
(City, State, Zip Code)	(City, State, Zip Code)			
(Telephone Number)	Mby J. Hassielle (Signature)			
	(Title) Owner, President, etc.			